			ر در	NION FEE	DETERMINA	ATION RECOR	Oi mormation	unless it dist	plays a valid OM	UF COMERCE	
	10-073							Thousand Dockel Number			
	LPCE,	3 24 06	1S AS F	ILED - PART	1				10 175,447		
•	BASIC SEC	FOR NIMECO SUC					SMALL ENTITY		OR OTHER THAI		
	(37, CFR 1.166	(37 CFR 1.16(a))				· RATE	FEE			7	
•	TOTAL CLAIM: (37 CFR 1.16(c	11 . [4]	<u> </u>		· · · ·		s		RATE	FR.	
	(37 CFR 1.16(b	CLAIMS	m	nus 20 = ·		x s 25	=	OR OR	1	5	
				Jus 3 = -		x : 100	× s 100=		x s <u>50</u> .		
		ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						OR	x s 200		
	* II the difference	the difference in column 1 is less than zero, enter "0" in column 2.						ОR	+360		
		CLAIMS AS AMENDED - PART II						OR	TOTAL	 	
- 1								_	TOTAL	L	
ŀ		(Column 1	(Column	1·2) (Column 3							
- 1	Y	. CLAIMS REMAININ	IG	HIGHES	r	SMALL	ENTITY	OR	OTHER	THAN	
	Total Total Garage (31 CFR 1.16(c) Independent U (31 OFR 1.160)	AFTER AMENOME	1	PREVIOUS	LY EXTRA	RATE	ADDI-] [SMALL	ENTITY	
1	Total (31 CFR 1.16(c		Min	PAID FOI	R		TIONAL FEE		RATE	ADD .	
			Minu	is ···		x s 25 =		· :	(5 <u>5</u> 0 =	FEE	
ŀ	≥		1	1	- ·	x s 100=					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s 180=		OR X	s 200		
								OR +	s3(d)		
-	(Column 1) (Column 2) (Column 3)					ADD'L FEE			OTAL DO'L FEE		
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	·	AFTER AMENDMENT	.	NUMBER PREVIOUSL:	PRESENT EXTRA	RATE .	ADDI-				
1 8	Total Discourse 1.16(d)	·	Minus	PAID FOR	=		TIONAL FEE	1.	RATE	ADDÍ- TIONAL	
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4	FIRST PRESEN	TATION OS AUG	-L		1 1	× s_100=					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5180=			200_		
		TOTAL ADO'L FEE		OR +	360						
-	·	(Column 1)		(Column 2)	(Column 2)	VOOCLEE T		OR ADI	DIL EEE	.	
0		CLAIMS ' REMAINING		HIGHEST	(Column 3)						
Ë		AFTER AMENDMENT		NUMBER PREVIOUSLY	PRESENT	RATE	A001-		LATE		
OM	Total (37 CFR 1.16(c))		Minus	PAID FOR	-	 	TIONAL FEE		l ri	ADDI- IONAL	
AMENOMENT	Indépendent (37 CFR 1.16(b))		Minus	444 ,		x s 25		OR KS	30_	FEE	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (31 CFR 1.16(d))					x s_1002			200		
	L	THOR UF MULTIPLE	DEPENDE	HT CLAIM (31 CF	+ 5 180=		·				
	' If the entorin	d		•	TOTAL	· °		16O ₌			
	* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For IN THIS SPACE is tess than 20, enter "20". The "Highest Number Previously Paid For IN THIS SPACE is tess than 20, enter "20".										
If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. The Highest Number Previously Paid For Mother Space is less than 3, enter 3. This collection of the Highest Number Previously Paid For Mother Space is less than 3, enter 3.											

The 'Highest Number Previously Paid For (NTHIS SPACE is less than 3, enter '3'.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any complete, and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS